### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Tuszynski, Mark H.

Title:

METHODS FOR THERAPY

OF NEURODEGENERATIVE DISEASE OF THE BRAIN

Prior Appl. No.:

09/060,543

Prior Appl. Filing

Date:

04/15/1998

Examiner:

Shin Lin Chen

Art Unit:

1632

# CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450. EL990322496US December 29, 2003 (Express Mail Label Number) (Date of Deposit) Michelle Sympson (Printed Name)

# CONTINUING PATENT APPLICATION TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

[X] Continuation [] Division [] Continuation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

[X] Applicant claims small entity status under 37 CFR 1.27.

## Enclosed are:

- [X] Specification, Claim(s), and Abstract (33 pages).
- [X] Declaration and Power of Attorney (3 pages).
- [X] Assignment of the invention to University of California, San Diego.
- [X] Preliminary Amendment (2 pages).
- [X] Application Data Sheet (37 CFR 1.76) (3 pages).
- [X] Sequence Listing (3 pages).
- [X] Statement to Support Filing and Submission of Sequence Listing (2 pages).
- [X] Computer Readable Copy of the Sequence Listing (1 disk).

# The filing fee is calculated below:

	Claims	Included in	1	Extra				Fee
	as Filed	Basic Fee		Claims		Rate		Totals
Basic Fee						\$750.00		\$750.00
Total Claims:		- 20	=	0	x	\$18.00	=	\$0.00
Independ ents:		- 3	_ =	0	X	\$84.00	=	\$0.00
If any Multiple Dependent Claim(s) present: + \$280.00							=	\$0.00
	-				SU	JBTOTAL:	=	\$750.00
[ X ]	Sm	all Entity Fee	s Ap	ply (subtra	act 1/2	of above):	=	\$375.00
TOTAL FILING FEE:							===	\$375.00

- [X] A check in the amount of \$375.00 to cover the filing fee is enclosed.
- [ ] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

FOLEY & LARDNER

Customer Number: 30542

Telephone:

(858) 847-6720

Facsimile:

(858) 792-6773

Stacy L. Taylor

Attorney for Applicant

Registration No. 34,842